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CONFIRMATION NO. 9718

<b>SERIAL NUMBER</b> 10/789,222	<b>FILING OR 371(c) DATE</b> 02/27/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1656	<b>ATTORNEY DOCKET NO.</b> UPN0003-100
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## APPLICANTS

Qin Yu, Philadelphia, PA; *HR*

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/450,582 02/27/2003 *HR*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

\*\* SMALL ENTITY \*\*

04/16/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 80	<b>INDEPENDENT CLAIMS</b> 13
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>HR</i>				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

34136

## TITLE

Angiopoietin and fragments, mutants, and analogs thereof and uses of the same

<b>FILING FEE RECEIVED</b> 3707	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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